## §52.71

is safe for the individual and is a part of the care plan.

(Authority: 38 U.S.C. 101, 501, 1741-1743)

(The Office of Management and Budget has approved the information collection requirements in this paragraph under control number 2900-0160.)

## §52.71 Participant and family caregiver responsibilities.

The program management has a written statement of participant and family caregiver responsibilities that are posted in the facility and provided to the participant and caregiver at the time of the intake screening. The Statement of responsibilities must include the following:

- (a) Treat personnel with respect and courtesy;
- (b) Communicate with staff to develop a relationship of trust;
- (c) Make appropriate choices and seek appropriate care;
- (d) Ask questions and confirm understanding of instructions;
- (e) Share opinions, concerns, and complaints with the program director;
- (f) Communicate any changes in the participant's condition;
- (g) Communicate to the program director about medications and remedies used by the participant;
- (h) Let the program director know if the participant decides not to follow any instructions or treatment; and
- (i) Communicate with the adult day health care staff if the participant is unable to attend the adult day health care program.

(The Office of Management and Budget has approved the information collection requirements in this paragraph under control number 2900–0160.)

## § 52.80 Enrollment, transfer and discharge rights.

- (a) Participants in the adult day health care program must meet the provisions of this part that apply to participants and—
- (1) Must meet at least two of the following indicators:
- (i) Dependence in two or more activities of daily living (ADLs).
- (ii) Dependence in three or more instrumental activities of daily living (IADLs).

- (iii) Advanced age, i.e., 75 years old or over.
- (iv) High use of medical services, i.e., three or more hospitalizations in past 12 months; or 12 or more hospitalizations, outpatient clinic visits; or emergency evaluation unit visits, in the past 12 months.
  - (v) Diagnosis of clinical depression.
- (vi) Recent discharge from nursing home or hospital.
- (vii) Significant cognitive impairment, particularly when characterized by multiple behavior problems;
- (2) Must have a supportive living arrangement sufficient to meet their health care needs when not participating in the adult day health care program; and
- (3) Must be able to benefit from the adult day health care program.
- (b) Transfer and discharge. (1) Definition. Transfer and discharge includes movement of a participant to a program outside of the adult day health care program whether or not that program or facility is in the same physical plant.
- (2) Transfer and discharge requirements. All participants' preparedness for discharge from adult day health care must be a part of a comprehensive care plan. The possible reasons for discharge must be discussed with the participant and family members at the time of intake screening. Program management must permit each participant to remain in the program, and not transfer or discharge the participant from the program unless—
- (i) The transfer or discharge is necessary for the participant's welfare and the participant's needs cannot be met in the adult day health care setting;
- (ii) The transfer or discharge is appropriate because the participant's health has improved sufficiently so the participant no longer needs the services provided in the adult day health care setting;
- (iii) The safety of individuals in the program is endangered;
- (iv) The health of individuals in the program would otherwise be endangered;
- (v) The participant has failed, after reasonable and appropriate notice, to pay for participation in the adult day health care program; or